

Part II Signature Block																
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.																
Sign Here	***** Signature of officer _____ Date 2022-11-23															
	MEHDIREZA HIRJI TREASURER Type or print name and title _____															
Paid Preparer Use Only	<table border="1"> <tr> <td>Print/Type preparer's name</td> <td>Preparer's signature</td> <td>Date</td> <td>Check <input type="checkbox"/> if self-employed</td> <td>PTIN P00576936</td> </tr> <tr> <td colspan="3">Firm's name ► VASQUEZ COMPANY LLP</td> <td colspan="2">Firm's EIN ► 33-0700332</td> </tr> <tr> <td colspan="3">Firm's address ► 655 N CENTRAL AVE STE 1550 GLENDALE, CA 91203</td> <td colspan="2">Phone no. (213) 873-1700</td> </tr> </table>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN P00576936	Firm's name ► VASQUEZ COMPANY LLP			Firm's EIN ► 33-0700332		Firm's address ► 655 N CENTRAL AVE STE 1550 GLENDALE, CA 91203			Phone no. (213) 873-1700	
	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN P00576936											
	Firm's name ► VASQUEZ COMPANY LLP			Firm's EIN ► 33-0700332												
Firm's address ► 655 N CENTRAL AVE STE 1550 GLENDALE, CA 91203			Phone no. (213) 873-1700													

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III ☐

1 Briefly describe the organization's mission:

AMERICAN MUSLIM COMMUNITY FOUNDATION SPECIFIC PURPOSE IS TO BUILD A BETTER WORLD FOR ALL WITH THE HELP OF A STRONG AND VIBRANT AMERICAN MUSLIM COMMUNITY & ORGANIZE AND ENHANCE MUSLIM PHILANTHROPY FOR THE BETTERMENT OF AMERICAN SOCIETY.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 5,337,927 including grants of \$ 4,881,070) (Revenue \$)
See Additional Data

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 5,337,927

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions.	2 Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	No
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5	No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6 Yes	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	10 Yes	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	No
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	No
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a Yes	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15 Yes	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions.	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21 Yes	

Part IV Checklist of Required Schedules (continued)

		Yes	No	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	0
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	

Part V **Statements Regarding Other IRS Filings and Tax Compliance** (continued)

2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 2			
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.		2b	Yes	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year? . . .		3a		No
b If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i> . . .		3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . .		4a		No
b If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . .		5a		No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		No
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? . . .		6a		No
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b		
7 Organizations that may receive deductible contributions under section 170(c).				
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		7a		No
b If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		No
d If "Yes," indicate the number of Forms 8282 filed during the year	7d 			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?				
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . .				
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7e		No
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7f		No
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		8		
9 Sponsoring organizations maintaining donor advised funds.				
a Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . .		9b		
10 Section 501(c)(7) organizations. Enter:				
a Initiation fees and capital contributions included on Part VIII, line 12	10a 			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b 			
11 Section 501(c)(12) organizations. Enter:				
a Gross income from members or shareholders	11a 			
b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b 			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?				
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b 	12a		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.				
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b 			
c Enter the amount of reserves on hand	13c 			
14a Did the organization receive any payments for indoor tanning services during the tax year?		14a		No
b If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i> . . .		14b		
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.		15		No
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? . . . If "Yes," complete Form 4720, Schedule O.		16		No
17 Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? . . . If "Yes," complete Form 6069.		17		

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.
Check if Schedule O contains a response or note to any line in this Part VI ☒

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	5	
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
b	Enter the number of voting members included in line 1a, above, who are independent	5	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	8a	Yes
b	Each committee with authority to act on behalf of the governing body?	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	12c	Yes
13	Did the organization have a written whistleblower policy?	13	Yes
14	Did the organization have a written document retention and destruction policy?	14	Yes
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	15a	Yes
b	Other officers or key employees of the organization	15b	No
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **CA**

18 Section 6104 requires an organization to make its Form 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records:
MEHDIREZA HIRJI PO BOX 1533 FREMONT, CA 94538 (844) 426-3863

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII ☐

☐

● List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

● List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee)

• List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

[illegible]

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

1b Sub-Total			
c Total from continuation sheets to Part VII, Section A			
d Total (add lines 1b and 1c)	15,549	0	0

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 0

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A)	(B)	(C)
Name and business address	Description of services	Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► 0	
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Part VIII **Statement of Revenue**

Check if Schedule O contains a response or note to any line in this Part VIII ☐

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns . . .	1a				
	b Membership dues . . .	1b				
	c Fundraising events . . .	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	7,305,402			
	g Noncash contributions included in lines 1a - 1f:\$	1g	2,992,710			
	h Total. Add lines 1a-1f ▶		7,305,402			
Program Service Revenue	2a	Business Code				
	b					
	c					
	d					
	e					
	f All other program service revenue.					
g Total. Add lines 2a-2f. ▶						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶		15,656			15,656
	4 Income from investment of tax-exempt bond proceeds ▶					
	5 Royalties ▶					
		(i) Real	(ii) Personal			
	6a Gross rents	6a				
	b Less: rental expenses	6b				
	c Rental income or (loss)	6c				
	d Net rental income or (loss) ▶					
		(i) Securities	(ii) Other			
	7a Gross amount from sales of assets other than inventory	7a	16,404			
	b Less: cost or other basis and sales expenses	7b	0			
	c Gain or (loss)	7c	16,404			
	d Net gain or (loss) ▶		16,404			16,404
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a				
	b Less: direct expenses	8b				
	c Net income or (loss) from fundraising events . . . ▶					
	9a Gross income from gaming activities. See Part IV, line 19	9a				
	b Less: direct expenses	9b				
	c Net income or (loss) from gaming activities . . . ▶					
	10a Gross sales of inventory, less returns and allowances . . .	10a				
b Less: cost of goods sold . . .	10b					
c Net income or (loss) from sales of inventory . . . ▶						
Miscellaneous Revenue	Business Code					
11a OTHER INCOME	900099	1,090			1,090	
b						
c						
d All other revenue						
e Total. Add lines 11a-11d ▶		1,090				
12 Total revenue. See instructions ▶		7,338,552	0	0	33,150	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX ☐

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	4,491,408	4,491,408		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	17,043	17,043		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	372,619	372,619		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	15,549	10,884	3,110	1,555
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	88,680	62,076	17,736	8,868
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	393,510	275,457	78,702	39,351
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	75,776	53,043	15,155	7,578
12 Advertising and promotion				
13 Office expenses	18,450	12,915	3,690	1,845
14 Information technology	18,967	13,277	3,793	1,897
15 Royalties				
16 Occupancy				
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	1,596	1,117	319	160
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a MARKETING SERVICES	39,677	27,774	7,935	3,968
b MISCELLANEOUS EXPESNES	450	314	91	45
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	5,533,725	5,337,927	130,531	65,267
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part IX ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	1,446,354	1	689,130
	2 Savings and temporary cash investments		2	1,103,991
	3 Pledges and grants receivable, net	235,963	3	36,446
	4 Accounts receivable, net		4	
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) . . .		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a		
	b Less: accumulated depreciation	10b	10c	
	11 Investments—publicly traded securities	140,425	11	2,443,283
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 33)	1,822,742	16	4,272,850	
Liabilities	17 Accounts payable and accrued expenses	1,687	17	
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties	18,905	24	407,023
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	20,592	26	407,023
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	30,675	27	-3,056,118
	28 Net assets with donor restrictions	1,771,475	28	6,921,945
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	1,802,150	32	3,865,827
33 Total liabilities and net assets/fund balances	1,822,742	33	4,272,850	

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	7,338,552
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,533,725
3	Revenue less expenses. Subtract line 2 from line 1	3	1,804,827
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,802,150
5	Net unrealized gains (losses) on investments	5	258,850
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	3,865,827

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

- 1** Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis
- c** If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
2a		No
2b	Yes	
2c	Yes	
3a		No
3b		

Additional Data

Software ID:
Software Version:
EIN: 81-2936073
Name: AMERICAN MUSLIM COMMUNITY FOUNDATION

Form 990 (2021)

Form 990, Part III, Line 4a:

AMERICAN MUSLIM COMMUNITY FOUNDATION MAKES GRANTS TO US CHARITABLE ORGANIZATIONS THAT ARE TAX-EXEMPT CHARITIES RECOGNIZED BY THE IRS. GRANTS ARE APPROVED IF THEY ARE USED FOR GENERAL PHILANTHROPY (SADAGA), RELIGIOUSLY MANDATED ALMSGIVING (ZAKAT), OR COMMUNITY POOLED FUNDING (DONOR-GIVING CIRCLES). THE CHARITIES SUPPORTED HAVE RANGED FROM HOSPITALS, SCHOOLS, AND RELIEF ORGANIZATIONS TO MUSEUMS, FOOD BANKS, AND EDUCATIONAL INSTITUTIONS.

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization
AMERICAN MUSLIM COMMUNITY FOUNDATION

Employer identification number
81-2936073

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9

☐

An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:
- 10

☐

An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11

☐

An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a

☐

Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b

☐

Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c

☐

Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d

☐

Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e

☐

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f

Enter the number of supported organizations
- g

Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . .	258,670	724,131	1,147,300	2,737,125	7,305,402	12,172,628
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. . . .						
3 The value of services or facilities furnished by a governmental unit to the organization without charge..						
4 Total. Add lines 1 through 3	258,670	724,131	1,147,300	2,737,125	7,305,402	12,172,628
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . .						2,351,751
6 Public support. Subtract line 5 from line 4.						9,820,877

Section B. Total Support							
Calendar year (or fiscal year beginning in) ►		(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7	Amounts from line 4. . .	258,670	724,131	1,147,300	2,737,125	7,305,402	12,172,628
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. . . .	820	8,233	3,152	10,307	15,656	38,168
9	Net income from unrelated business activities, whether or not the business is regularly carried on. .						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). . .					1,090	1,090
11	Total support. Add lines 7 through 10						12,211,886
12	Gross receipts from related activities, etc. (see instructions)					12	
13	First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input checked="" type="checkbox"/>						

Section C. Computation of Public Support Percentage						
14 Public support percentage for 2021 (line 6, column (f) divided by line 11, column (f))						14
15 Public support percentage for 2020 Schedule A, Part II, line 14						15
16a 33 1/3% support test—2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>						
b 33 1/3% support test—2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>						
17a 10%-facts-and-circumstances test—2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>						
b 10%-facts-and-circumstances test—2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>						
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>						

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. . .						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
c Add lines 7a and 7b. .						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 Amounts from line 6. . .						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. .						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c Add lines 10a and 10b.						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on.						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . .						
13 Total support. (Add lines 9, 10c, 11, and 12.) .						
14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2021 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2020 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2021 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2020 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2021. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☐

b 33 1/3% support tests—2020. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► ☐

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, of Part I, complete Sections A and B. If you checked box 12b, of Part I, complete Sections A and C. If you checked box 12c, of Part I, complete Sections A, D, and E. If you checked box 12d, of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
1		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
2		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
3a		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
3b		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
3c		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
4a		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
4b		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
4c		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
5a		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
5b		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
5c		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
6		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
7		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
9a		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
9b		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
9c		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
10a		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).</i>		
10b		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
b A family member of a person described on 11a above?		
c A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to 11a, 11b, or 11c, provide detail in Part VI.</i>		
	11a	
	11b	
	11c	

Section B. Type I Supporting Organizations

	Yes	No
1 Did the officers, directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
	1	
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		
	2	

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		
	1	

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
	1	
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
	2	
3 By reason of the relationship described in line 2 above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
	3	

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)		
2 Activities Test. Answer lines 2a and 2b below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No
	2a	
b Did the activities described on line 2a, above constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
	2b	
3 Parent of Supported Organizations. Answer lines 3a and 3b below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No," provide details in Part VI.</i>		
	3a	
b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
	3b	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1** ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1		
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):			
2 Acquisition indebtedness applicable to non-exempt use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 0.035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7 <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)			

Part V

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	8
9	Distributable amount for 2021 from Section C, line 6	9
10	Line 8 amount divided by Line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2021 (reasonable cause required-- explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2021:		
a	From 2016.		
b	From 2017.		
c	From 2018.		
d	From 2019.		
e	From 2020.		
f	Total of lines 3a through e		
g	Applied to underdistributions of prior years		
h	Applied to 2021 distributable amount		
i	Carryover from 2016 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2021 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2021 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI. See instructions.		
6	Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions.		
7	Excess distributions carryover to 2022. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2017.		
b	Excess from 2018.		
c	Excess from 2019.		
d	Excess from 2020.		
e	Excess from 2021.		

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

990 Schedule A, Supplemental Information

Return Reference	Explanation
SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER INCOME:	OTHER INCOME - 2021 AMOUNT: \$ 1,090.

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SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.
► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization
AMERICAN MUSLIM COMMUNITY FOUNDATION

Employer identification number
81-2936073

Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	147	
2 Aggregate value of contributions to (during year)	6,357,132	
3 Aggregate value of grants from (during year)	5,262,774	
4 Aggregate value at end of year	2,640,477	

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?

☒ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

☒ Yes ☐ No

Part II

Conservation Easements.
Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

☐ Preservation of land for public use (e.g., recreation or education)

☐ Preservation of an historically important land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►

4 Number of states where property subject to conservation easement is located ►

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 ► \$

(ii) Assets included in Form 990, Part X ► \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ► \$

b Assets included in Form 990, Part X ► \$

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Cat. No. 52283D Schedule D (Form 990) 2021

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . .

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII and complete the following table:

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . .

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

☐

Part V

Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	44,369	17,759	17,554	14,886	
b Contributions	349,924	26,610	205	2,668	14,886
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	349,293	44,369	17,759	17,554	14,886

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a

Board designated or quasi-endowment ▶

b

Permanent endowment ▶ 100.000 %

c

Term endowment ▶

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) Unrelated organizations

3a(i)

Yes

No

(ii) Related organizations

3a(ii)

Yes

No

b

If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

3b

Yes

No

4

Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI

Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				0

Schedule D (Form 990) 2021

Part VII

Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII

Investments - Program Related.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.) ▶		

Part IX

Other Assets.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.) ▶	

Part X

Other Liabilities.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

(a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.) ▶	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☒

Schedule D (Form 990) 2021

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	7,597,402
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	258,850
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	258,850
3	Subtract line 2e from line 1	3	7,338,552
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	7,338,552

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	5,533,725
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	5,533,725
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	5,533,725

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 81-2936073
Name: AMERICAN MUSLIM COMMUNITY FOUNDATION

Supplemental Information

Return Reference	Explanation
PART X, LINE 2:	AMCF IS EXEMPT FROM TAXATION UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND SECTION 23701D OF THE CALIFORNIA REVENUE AND TAXATION CODE AND IS GENERALLY NOT SUBJECT TO FEDERAL OR STATE INCOME TAXES. HOWEVER, AMCF IS SUBJECT TO INCOME TAXES ON ANY NET INCOME THAT IS DERIVED FROM A TRADE OR BUSINESS, REGULARLY CARRIED ON, AND NOT IN FURTHERANCE OF THE PURPOSES FOR WHICH IT WAS GRANTED EXEMPTION. NO INCOME TAX PROVISION HAS BEEN RECORDED AS THE NET INCOME, IF ANY, FROM ANY UNRELATED TRADE OR BUSINESS, IN THE OPINION OF MANAGEMENT, IS NOT MATERIAL TO THE FINANCIAL STATEMENTS TAKEN AS A WHOLE. GAAP REQUIRES THAT AN ORGANIZATION RECOGNIZE IN THE FINANCIAL STATEMENTS THE IMPACT OF A TAX POSITION IF THAT POSITION WILL MORE LIKELY THAN NOT BE SUSTAINED ON AUDIT, BASED ON THE TECHNICAL MERITS OF THE POSITION. AS OF AND FOR THE YEAR ENDED DECEMBER 31, 2021, AMCF HAD NO MATERIAL UNRECOGNIZED TAX BENEFITS, TAX PENALTIES, OR INTEREST. AS OF DECEMBER 31, 2021, INFORMATION RETURNS SUBSEQUENT TO 2017 FILED BY AMCF ARE SUBJECT TO EXAMINATION BY THE TAXING AUTHORITIES.

SCHEDULE F
(Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.
► Attach to Form 990.
► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization
AMERICAN MUSLIM COMMUNITY FOUNDATION

Employer identification number
81-2936073

Part I

General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

- 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☒ No
- 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1)					
(2)					
(3)					
(4)					
(5)					
3a Sub-total	0	0			0
b Total from continuation sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	0	0			0

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)		ANTARCTICA	FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.	372,619		0		
(2)								
(3)								
(4)								

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter **0**

3 Enter total number of other organizations or entities **1**

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* ☐ Yes ☒ No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* ☐ Yes ☒ No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)* ☐ Yes ☒ No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* . ☐ Yes ☒ No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* ☐ Yes ☒ No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990).* ☐ Yes ☒ No

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART I, LINE 2:	THE PROCEDURES USED FOR MONITORING THE USE OF GRANTS AND OTHER ASSISTANCE OUTSIDE THE U.S. INCLUDE OBTAINING A PROGRESS REPORT AND A FINAL REPORT, INCLUDING PICTURES. THE MONITORING PROCESS INCLUDES MEETINGS, TESTING EVENTS, AND EDUCATIONAL SEMINARS TO ENSURE THE GRANTS ARE SPENT ACCORDING TO THE GRANT AGREEMENT.

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART III ACCOUNTING METHOD:	

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I
(Form 990)

Grants and Other Assistance to Organizations,
Governments and Individuals in the United States
Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2021

Open to Public
Inspection

Department of the
Treasury
Internal Revenue Service

Name of the organization
AMERICAN MUSLIM COMMUNITY FOUNDATION

Employer identification number
81-2936073

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 105

3 Enter total number of other organizations listed in the line 1 table ▶ 1

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) DIRECT CASH ASSISTANCE	1	11,721			
(2)					
(3)					
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Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PART I, LINE 2:	THE ORGANIZATION'S PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS IN THE U. S. INCLUDE OBTAINING REPORTS THAT SUPPORT THE BUDGETED AMOUNTS SUBMITTED WITH THE GRANT REQUEST ARE SPENT ACCORDINGLY. FINANCIAL REPORTS ARE PERIODICALLY OBTAINED TO SUPPORT THE GRANT EXPENDITURES ARE CONSISTENT WITH THE WRITTEN AGREEMENT.

Additional Data

Software ID:
Software Version:
EIN: 81-2936073
Name: AMERICAN MUSLIM COMMUNITY FOUNDATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
A CONTINUOUS CHARITY 7035 NUECES DRIVE IRVING, TX 75039	45-5424452	501(C)(3)	14,650	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
AL-HUDA ISLAMIC CENTER CHARITABLE TRUST PO BOX 28 ITHACA, NY 14851	31-6669078	501(C)(3)	100,000	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

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AL-IKHLAS TRAINING ACADEMY 12555 MCDOUGALL STREET DETROIT, MI 48212	38-3006639	501(C)(3)	19,025	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
ALL DULLES AREA MUSLIM SOCIETY (ADAMS CENTER) 46903 SUGARLAND RD STERLING, VA 20164	31-1262759	501(C)(3)	5,500	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

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AL-MADINA INSTITUTE 7252 CALM SUNSET COLUMBIA, MD 21046	26-4720262	501(C)(3)	65,139	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
AMOUD FOUNDATION 3636 W NORTHGATE DRIVE IRVING, TX 75062	75-2882187	501(C)(3)	11,360	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

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ATLANTA MASJID OF AL-ISLAM 560 FAYETTEVILLE ROAD SOUTHEAST ATLANTA, GA 30316	58-1242857	501(C)(3)	6,009	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
AVERROES INSTITUTE 43433 MISSION BLVD SUITE 101 FREMONT, CA 94539	27-4119068	501(C)(3)	15,500	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

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BAYAN ISLAMIC GRADUATE SCHOOL 2854 N SANTIAGO BLVD STE 201 ORANGE, CA 92867	46-2431099	501(C)(3)	8,700	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
BROOKLYN PARK ISLAMIC CENTER 2100 93RD WAY N BROOKLYN PARK, MN 55444	47-1224348	501(C)(3)	10,000	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

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BUILDING BLOCKS OF ISLAM 3900 JACKSON ST NE COLUMBIA HEIGHTS, MN 55421	20-5035650	501(C)(3)	10,000	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
CAIR-CALIFORNIA (CAIR-CA) 2180 W CRESCENT AVENUE SUITE F ANAHEIM, CA 92801	77-0411194	501(C)(3)	8,000	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

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CAIR-LA 2180 W CRESCENT AVENUE SUITE F ANAHEIM, CA 92801	77-0411194	501(C)(3)	26,500	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
CHARITIES AID FOUNDATION AMERICA (CAF AMERICA) 225 REINEKERS LANE ALEXANDRIA, VA 22314	43-1634280	501(C)(3)	276,279	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

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COUNCIL ON AMERICAN-ISLAMIC RELATIONS (CAIR NATIONAL) 453 NEW JERSEY AVE SE WASHINGTON, DC 20003	82-0922964	501(C)(3)	35,000	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
COUNCIL ON AMERICAN-ISLAMIC RELATIONS (CAIR) FLORIDA 8076 N 56TH STREET TAMPA, FL 33617	65-1110616	501(C)(3)	10,000	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

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COUNCIL ON AMERICAN-ISLAMIC RELATIONS MICHIGAN 1905 S HAGGERTY RD 5 CANTON, MI 48188	38-3534607	501(C)(3)	5,600	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
COUNCIL ON AMERICAN-ISLAMIC RELATIONS SFBA 3160 DE LA CRUZ BLVD SUITE 110 SANTA CLARA, CA 95054	77-0411194	501(C)(3)	37,213	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

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CULTURINGUA 8920 JOHN BARRETT DRIVE SAN ANTONIO, TX 78240	84-1940407	501(C)(3)	41,603	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
DEEN INTENSIVE FOUNDATION 12618 S WINNERS CIRCLE DAVIE, FL 33330	20-2537496	501(C)(3)	28,000	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

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EBADUR RAHMAN CORPORATION 1991 SUNNY DALE DRIVE TALLAHASSEE, FL 32312	85-2212781	501(C)(3)	18,650	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
EDHI FOUNDATION 4316 NATIONAL STREET FLUSHING, NY 11368	11-3013369	501(C)(3)	6,511	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

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FACING ABUSE IN COMMUNITY ENVIRONMENTS PO BOX 80234 AUSTIN, TX 78708	82-2714450	501(C)(3)	13,182	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
FRIENDS OF INDUS HOSPITAL 155 CEDAR LANE TEANECK, NJ 07666	20-4751162	501(C)(3)	6,500	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

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GIVELIGHT FOUNDATION 1879 LUNDY AVE STE 226 SAN JOSE, CA 95131	56-2500794	501(C)(3)	44,600	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
HAYDAR FOUNDATION 2337 STONEFIELD DR FLUSHING, MI 48433	45-3087568	501(C)(3)	20,000	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

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HEALTH ORIENTED PREVENTIVE EDUCATION USA PO BOX 786 NEWARK, CA 94560	26-0257617	501(C)(3)	23,449	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
HEALTH UNIT ON DAVISON AVENUE CLINIC (HUDA CLINIC) 13240 WOODROW WILSON STREET DETROIT, MI 48238	37-1490937	501(C)(3)	9,700	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

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HELPING HAND FOR RELIEF AND DEVELOPMENT 21199 HILLTOP STREET SOUTHFIELD, MI 48033	31-1628040	501(C)(3)	115,350	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
HIDAYA FOUNDATION 1765 SCOTT BLVD STE 115 SANTA CLARA, CA 95050	77-0502583	501(C)(3)	140,544	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

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ICNA RELIEF USA PROGRAMS INC 1529 JERICHO TURNPIKE NEW HYDE PARK, NY 11040	04-3810161	501(C)(3)	47,656	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
INDIAN AMERICAN MUSLIM COUNCIL 6321 DEMPSTER ST STE 295 MORTON GROVE, IL 60053	05-0532361	501(C)(3)	5,001	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

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INDIAN MUSLIM RELIEF AND CHARITIES (IMRC) 849 INDEPENDENCE AVENUE MOUNTAIN VIEW, CA 94043	27-0058132	501(C)(3)	58,318	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
INNER-CITY MUSLIM ACTION NETWORK (IMAN) 2744 W 63RD STREET CHICAGO, IL 60629	36-4167433	501(C)(3)	21,600	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

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INSTITUTE FOR SOCIAL POLICY & UNDERSTANDING 6 PARKLANE BLVD SUITE 510 DEARBORN, MI 48126	38-3633581	501(C)(3)	21,000	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
INSTITUTE OF KNOWLEDGE 1009 VIA SORELLA DIAMOND BAR, CA 91789	83-1794582	501(C)(3)	10,950	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

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INTERNATIONAL RESCUE COMMITTEE 122 E 42ND STREET 11TH FLOOR NEW YORK, NY 10168	13-5660870	501(C)(3)	8,000	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
INTERNATIONAL VILLAGE CLINIC PO BOX 386243 BLOOMINGTON, MN 55438	41-1951636	501(C)(3)	10,000	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

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ISLAH LA 2900 W SLAUSON AVENUE LOS ANGELES, CA 90043	46-3181182	501(C)(3)	6,900	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
ISLAMIC CENTER OF FULLERTON 515 W VALENCIA DRIVE FULLERTON, CA 92832	26-2885635	501(C)(3)	40,000	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

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ISLAMIC CENTER OF GREATER AUSTIN 5110 MANOR RD AUSTIN, TX 78723	27-0134250	501(C)(3)	20,000	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
ISLAMIC CIRCLE OF NORTH AMERICA - SAN FRANCISCO BAY AREA 2086 WALSH AVENUE SANTA CLARA, CA 95050	26-3583250	501(C)(3)	8,500	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

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ISLAMIC EDUCATIONAL COUNCIL 8092 PLANTATION DRIVE WEST CHESTER, OH 45069	31-1398745	501(C)(3)	25,000	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
ISLAMIC NETWORKS GROUP 3031 TISCH WAY SUITE 950 SAN JOSE, CA 95128	77-0412815	501(C)(3)	5,500	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

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ISLAMIC RELIEF USA PO BOX 22250 ALEXANDRIA, VA 22304	95-4453134	501(C)(3)	541,613	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
ISLAMIC SOCIETY OF NORTH AMERICA (ISNA) 6555 S COUNTY ROAD 750 E PLAINFIELD, IN 46168	31-1054012	501(C)(3)	13,100	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

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ISLAMIC SPEAKERS BUREAU OF ATLANTA 2318 GARDEN PARK DR SE SMYRNA, GA 30080	20-5638166	501(C)(3)	6,008	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
LIFE FOR RELIEF & DEVELOPMENT (LIFE USA) 17300 W 10 MILE RD SOUTHFIELD, MI 48075	95-4402149	501(C)(3)	6,900	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

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MACAU CULTURAL CENTER 7222 CUTTING BLVD EL CERRITO, CA 94530	84-1671190	501(C)(3)	5,600	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
MASJID BILAL ISLAMIC CENTER 4016 S CENTRAL AVE LOS ANGELES, CA 90011	03-0387154	501(C)(3)	5,100	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

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MERCY USA FOR AID & DEVELOPMENT 44450 PINETREE DR STE 201 PLYMOUTH, MI 48170	38-2846307	501(C)(3)	10,000	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
MU'EED 3630 HIGH ST 18465 OAKLAND, CA 94619	68-0301012	501(C)(3)	36,798	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

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MUHSEN PO BOX 9486 NAPERVILLE, IL 60567	47-3187591	501(C)(3)	25,000	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
MUSLIM ALLIANCE OF NORTH AMERICA (MANA) 4100 SOLBERG LANE LEXINGTON, KY 40514	71-0997466	501(C)(3)	11,000	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

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MUSLIM ASSOCIATION OF GREATER ROCKFORD 5921 DARLENE DRIVE ROCKFORD, IL 61109	36-3633427	501(C)(3)	11,000	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
MUSLIM ASSOCIATION OF PUGET SOUND 17550 NE 67TH CT REDMOND, WA 98052	20-4423661	501(C)(3)	10,000	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MUSLIM CENTER OF SAINT CLOUD (DBA ALHUDA MASJID) 4793 OLD CANOE CREEK RD ST CLOUD, FL 34769	46-5355277	501(C)(3)	6,000	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
MUSLIM COMMUNITY ASSOCIATION (MCA BAY AREA) 3003 SCOTT BLVD SANTA CLARA, CA 95054	27-2442632	501(C)(3)	89,614	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MUSLIM COMMUNITY SUPPORT SERVICES 13492 RESEARCH BLVD STE 120-622 AUSTIN, TX 78750	74-2977031	501(C)(3)	21,000	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
MUSLIM ENRICHMENT PROJECT PO BOX 871598 CANTON, MI 48187	27-4199883	501(C)(3)	20,025	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MUSLIM FAMILY SERVICES 12346 MCDOUGALL STREET DETROIT, MI 48212	04-3810161	501(C)(3)	10,450	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
MUSLIM HOUSING SERVICES 6727 RAINIER AVE S 26 SEATTLE, WA 98118	91-1987910	501(C)(3)	10,000	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MUSLIM WELLNESS FOUNDATION 21 S 11TH STREET FLOOR 2 PHILADELPHIA, PA 19107	47-2533025	501(C)(3)	22,500	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
MUSLIM WOMEN'S ORGANIZATION 2813 S HIAWASSEE ROAD SUITE 103 ORLANDO, FL 32835	45-3740080	501(C)(3)	8,520	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NASEEHA USA INC 16984 NIAGARA COURT NORTHVILLE, MI 48168	83-4406712	501(C)(3)	533,040	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
NORTH AMERICAN ISLAMIC SHELTER FOR THE ABUSED (NISA) PO BOX 50515 PALO ALTO, CA 94303	26-0906163	501(C)(3)	41,500	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OBAT HELPERS INC 1100 W 42ND STREET INDIANAPOLIS, IN 46208	47-0946122	501(C)(3)	14,000	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
PEACEFUL FAMILIES PROJECT PO BOX 771 GREAT FALLS, VA 22066	11-3840138	501(C)(3)	7,849	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PENNY APPEAL USA 2461 EISENHOWER AVE 2 ALEXANDRIA, VA 22314	47-5165837	501(C)(3)	489,881	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
PILLARS OF PEACE 201 VARICK ST FRNT 1 NEW YORK, NY 10014	83-3597054	501(C)(3)	7,500	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PURE HANDS 7340 TX-78 SUITE 270 SACHSE, TX 75048	45-4810098	501(C)(3)	8,700	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
QALAM INSTITUTE PO BOX 180506 ARLINGTON, TX 76096	47-1633329	501(C)(3)	16,500	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RABATA 3533 LEXINGTON AVE N SAINT PAUL, MN 55126	46-4208628	501(C)(3)	8,000	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
RAHIMA FOUNDATION 2290 RINGWOOD AVE STE A SAN JOSE, CA 95131	77-0442850	501(C)(3)	42,211	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YALLA KAFALA 15 ONONDAGA AVE 12296 SAN FRANCISCO, CA 94112	85-3323627	501(C)(3)	10,355	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
SAHABA INITIATIVE 1887 BUSINESS CENTER DRIVE SUITE 3 SAN BERNARDINO, CA 92401	45-2488503	501(C)(3)	10,000	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SEEKERS GUIDANCE 24906 S RUPP ROAD CHENEY, WA 99004	27-1124384	501(C)(3)	6,000	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
SILICON VALLEY ACADEMY 195 LEOTA AVENUE SUNNYVALE, CA 94086	86-1113567	501(C)(3)	9,000	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOUTH BAY ISLAMIC ASSOCIATION 2345 HARRIS WAY SAN JOSE, CA 95131	94-2683384	501(C)(3)	156,700	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
SUNRISE USA PO BOX 910 RAMSEY, NJ 07446	45-3956321	501(C)(3)	6,500	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SYRIAN AMERICAN MEDICAL SOCIETY FOUNDATION 1012 14TH ST NW STE 1500 WASHINGTON, DC 20005	05-0513407	501(C)(3)	7,100	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
SYRIAN FORUM USA 10S410 KINGERY HWY 5 WILLOWBROOK, IL 60527	46-5202334	501(C)(3)	7,650	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TAYBA FOUNDATION 31080 UNION CITY BLVD UNION CITY, CA 94587	26-3342933	501(C)(3)	98,600	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
TEXAS MUSLIM WOMENS FOUNDATION PO BOX 863388 PLANO, TX 75086	20-3060929	501(C)(3)	5,233	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE CITIZENS FOUNDATION USA 2900 WILCREST DR SUITE 225 HOUSTON, TX 77042	41-2046295	501(C)(3)	36,300	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
THE HASSAN FOUNDATION 25779 KELLY RD STE C ROSEVILLE, MI 48066	56-2639095	501(C)(3)	6,750	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE MUSLIM CONNECTION 8080 N 56TH STREET TAMPA, FL 33617	46-3406742	501(C)(3)	15,000	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
THE OASIS INITIATIVE 1738 PROVENANCE WAY NORTHBROOK, IL 60062	30-0780532	501(C)(3)	15,900	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE PALESTINE CHILDREN'S RELIEF FUND 1340 MORRIS ROAD KENT, OH 44240	93-1057665	501(C)(3)	11,100	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
UNITED HANDS RELIEF 3107 AVENUE E ARLINGTON, TX 76011	81-2039508	501(C)(3)	10,200	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED MISSION FOR RELIEF & DEVELOPMENT 1990 K ST NW STE 425 WASHINGTON, DC 20006	27-3175543	501(C)(3)	8,150	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
UNIVERSITY OF TEXAS AT AUSTIN PO BOX 7458 AUSTIN, TX 78713	74-6000203	501(C)(3)	40,687	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UPLIFT CHARITY INC 1205 N RED GUM ST STE B ANAHEIM, CA 92806	33-0210280	501(C)(3)	118,850	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
VFAIRS LLC 471 GRACE LANE COPPELL, TX 75019	99-9999999		11,034	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WEST VALLEY MUSLIM ASSOCIATION 12370 SARATOGA SUNNYVALE RD SARATOGA, CA 95070	26-1328437	501(C)(3)	17,700	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
YAQEEEN INSTITUTE FOR ISLAMIC RESEARCH 7750 N MACARTHUR BLVD STE 120237 IRVING, TX 75063	81-2822877	501(C)(3)	9,200	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ZAKAT FOUNDATION OF AMERICA 7421 W 100TH PLACE BRIDGEVIEW, IL 60455	36-4476244	501(C)(3)	48,475	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
ZAYTUNA COLLEGE 2401 LE CONTE AVENUE BERKELEY, CA 94709	33-0720978	501(C)(3)	38,350	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MUSLIM COMMUNITY CENTER EAST BAY 5724 W LAS POSITAS BLVD SUITE 300 PLEASANTON, CA 94588	20-8085421	501(C)(3)	7,048	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.
MUSLIM LEGAL FUND OF AMERICA 833 E ARAPAHO RD STE 209 RICHARDSON, TX 75081	01-0548371	501(C)(3)	15,800	0			FOR GENERAL PHILANTHROPY, RELIGIOUSLY MANDATED ALMSGIVING AND COMMUNITY POOLED FUNDING.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NORTH AUSTIN MUSLIM COMMUNITY CENTER (NAMCC) 11900 NORTH LAMAR BLVD APT 131 AUSTIN, TX 78753	74-2721508	501(C)(3)	55,000	0			11900 NORTH LAMAR BLVD., APT. 131 AUSTIN, TX 78753

SCHEDULE M
(Form 990)

Noncash Contributions

►Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
► Attach to Form 990.
►Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
AMERICAN MUSLIM COMMUNITY FOUNDATION

Employer identification number
81-2936073

Part I

Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures . .				
3 Art—Fractional interests . .				
4 Books and publications . .				
5 Clothing and household goods				
6 Cars and other vehicles . . .				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded .	X	50	2,992,710	QUOTED AVERAGE PRICE
10 Securities—Closely held stock .				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous . .				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential . .				
16 Real estate—Commercial . .				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies .				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts . . .				
25 Other ► (_____)				
26 Other ► (_____)				
27 Other ► (_____)				
28 Other ► (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?

30a

Yes

No

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

31

No

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

32a

No

b If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
PART 1 COLUMN B	THE ORGANIZATION IS REPORTING IN PART 1, COLUMN B, THE NUMBER OF CONTRIBUTIONS.

SCHEDULE O
(Form 990)Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990 or 990-EZ**Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2021**Open to Public
Inspection**

Name of the organization

AMERICAN MUSLIM COMMUNITY FOUNDATION

Employer identification number

81-2936073

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	AMERICAN MUSLIM COMMUNITY FOUNDATION'S CPA FIRM AND FINANCE TEAM PREPARE THE FORM 990. THE FORM IS REVIEWED AND APPROVED BY THE ORGANIZATION'S EXECUTIVE DIRECTOR. THE FORM 990, INCLUDING ALL SCHEDULES, IS PROVIDED TO THE FULL BOARD OF DIRECTORS PRIOR TO FILING.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	<p>ALL OFFICERS, DIRECTORS AND KEY EMPLOYEES ARE COVERED PERSONS UNDER AMERICAN MUSLIM COMMUNITY FOUNDATION'S (AMCF) CONFLICT OF INTEREST POLICY. AN ANNUAL CONFLICT OF INTEREST DISCLOSURE FORM IS REQUIRED TO BE COMPLETED BY ALL COVERED PERSONS WHEREIN THEY AFFIRM THAT THEY</p> <p>1) HAVE RECEIVED A COPY OF THE CONFLICT OF INTEREST POLICY; 2) HAVE READ AND UNDERSTAND THE CONFLICT OF INTEREST POLICY; 3) AGREE TO COMPLY WITH THE CONFLICT OF INTEREST POLICY; 4) AFFIRM ANY TRANSACTIONS THEY OR A FAMILY MEMBER HAVE ENTERED INTO, DIRECTLY OR INDIRECTLY, WITH AMCF; 5) AFFIRM WHETHER THEY OR A FAMILY MEMBER HELD A POSITION WITH AN ORGANIZATION THE AMCF HAS ANY BUSINESS RELATIONSHIP WITH; 6) AFFIRM WHETHER THEY OR A FAMILY MEMBER HAD A FINANCIAL INTEREST IN ANY ORGANIZATION THAT AMCF HAS OR IS CONTEMPLATING ENTERING INTO A BUSINESS RELATIONSHIP WITH; AND 7) AFFIRM WHETHER THEY OR A FAMILY MEMBER RECEIVED ANY GIFTS, MONEY, LOANS OR OTHER TYPE OF SERVICE OR FAVOR WITH A MARKET VALUE OF \$200 OR MORE FROM ANY PERSON OR ORGANIZATION THAT HAS, OR IS SEEKING TO HAVE, A BUSINESS RELATIONSHIP WITH THE AMCF. THE BOARD OF DIRECTORS REVIEWS THE ANNUAL DISCLOSURES AND ADDRESSES ANY POTENTIAL CONFLICTS OF INTEREST, WITH ANY INTERESTED PERSON ABSTAINING FROM THE DELIBERATION AND DISCUSSION OF THE MATTER.</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15A	<p>AMERICAN MUSLIM COMMUNITY FOUNDATION'S BOARD OF DIRECTORS HAS A PROCESS FOR REVIEWING AND APPROVING THE COMPENSATION OF THE EXECUTIVE DIRECTOR ON A REGULAR BASIS TO DETERMINE IT IS FAIR AND REASONABLE WITH THE GOAL OF RETAINING EMPLOYEES AT COMPENSATION LEVELS WITHIN AN APPROPRIATE MARKET RANGE. THE PROCESS FOR DETERMINING THE COMPENSATION PAID TO THE EXECUTIVE DIRECTOR INCLUDES THE APPROVAL OF THE COMPENSATION ARRANGEMENT IN ADVANCE, BY THE BOARD OF DIRECTORS, WITH ALL PERSONS WITH A CONFLICT OF INTEREST ABSTAINING FROM THE BOARD'S DELIBERATION AND DISCUSSION. THE BOARD REVIEWS DATA OF COMPARABLE COMPENSATION FOR SIMILARLY QUALIFIED NONPROFIT EXECUTIVES AT SIMILARLY SITUATED ENTITIES. THE DOCUMENTATION OF THE BOARD INCLUDES THE TERMS OF THE TRANSACTION AND THE DATE OF APPROVAL, THE MEMBERS WHO WERE PRESENT DURING THE DEBATE AND VOTE ON THE TRANSACTION, A DESCRIPTION OF THE COMPARABLE DATA AND HOW IT WAS OBTAINED, AND DOCUMENTATION OF THE BASIS FOR THE DETERMINATION.</p>

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Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	GOVERNING DOCUMENTS, THE CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST. HOWEVER, CURRENT TAX LAW DOES NOT REQUIRE GOVERNING DOCUMENTS, THE CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENT BE PROVIDED TO THE PUBLIC.